CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

Date Received

COVER PAGE

MAR . 1 2011

Please type or print in ink. (MIDDLE) NAME OF FILER (LAST) PAYLEY FRANCES 1. Office, Agency, or Court Agency Name Senate Division, Board, Department, District, if applicable Your Position Senator 23rd District ▶ If filing for multiple positions, list below or on an attachment. Position: Agency: _ 2. Jurisdiction of Office (Check at least one box) 'X State ☐ Judge (Statewide Jurisdiction) Multi-County _____ County of ___ Other _ City of ___ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2010, through December 31, Leaving Office: Date Left _____/__ 2010. (Check one) O The period covered is January 1, 2010, through the date of The period covered is _______, through December 31, leaving office. O The period covered is ____/___, through the date Assuming Office: Date ____/_ of leaving office. Candidate: Election Year _____ Office sought, if different than Part 1: _ 4. Schedule Summary Check applicable schedules or "None." . > Total number of pages including this cover page: Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-2 - Investments - schedule attached Schedule D . Income - Gifts - schedule attached Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached -or-5. I have used all reasonable diligence in preparing this statement. I have reviewed this herein and in any attached schedules is true and complete. I acknowledge this is a I certify under penalty of perjury under the laws of the State of California that Jan. 23, 2011 (month, day, year) Signatur (File the originally signed statement with your filing official.)

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received

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NA	ME OF FILER	(LAST)	(FIRST)	(MIDDLE)
		PAYLEY	FRANCES (FRAN)	<u> </u>
1.	Office, Agency, o			
		State Sena	· · · · · · · · · · · · · · · · · · ·	
		ment, District, if applicable District	State Sena	ctor
	► If filing for multiple p	ositions, list below or on an attachmen	nt.	
	Agency:	···	Position;	· · · · · · · · · · · · · · · · · · ·
2.	Jurisdiction of C	Office (Check at least one box)		
	★ State		☐ Judge (Statewide Jurisdiction)	
	Multi-County		County of	A 12 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
	City of		Other	
_ 3.	Type of Stateme	nt (Check at least one box)		
		od covered is January 1, 2010, through	December 31, Leaving Office: Date Left	<u> </u>
		ered is, through	December 31, O The period covered is January leaving office.	1, 2010, through the date of
	Assuming Office:	Date	The period covered is/_ of leaving office.	, through the date
	Candidate: Election	on Year Office	e sought, if different than Part 1:	
4.	Schedule Summ	arv		
	Check applicable sche	•	► Total number of pages including this cover	r page:
	Schedule A-1 - Inv	restments - schedule attached	Schedule C - Income, Loans, & Busines	s Positions - schedule attached
	Schedule A-2 - Inv	estments - schedule attached	Schedule D - Income - Gifts - schedule	attached
	Schedule B - Real	Property - schedule attached	Schedule E - Income - Gifts - Travel Pa	syments - schedule attached
			-or- portable interests on any schedule	
5.	Verification		<u> </u>	<u> </u>
	MAILING ADDRESS	STREET	CITY STATE	ZIP CODE
1)(5		Recommended - Public Document		
	DAYTIME TEI EPHONE NUME	LER .	E-MAIL ADDRESS	
(0	d)(5)		(d)(5)	
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of herein and in any attached schedules is true and complete. I acknowledge this is a public document,				riedge the information contained
	I certify under penalty	of perjury under the laws of the Sta	ate of California that the foregoing is true and correct.	
	Date Signed Q	M. 23 2011	(d)(5) Signature (File the enginely signed statement	^

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

FAIR POLITICAL PRACTICES COMMISSION	
Name	
F Pavley	
 	

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
DAMIER CHIUSTER GENERAL DESCRIPTION OF BUSINESS ACTIVITY	CISCO SYSTEM INC GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Car manufacture FAIR MARKET VALUE \$ \$2,000 - \$10,000	Networking FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY ANGEN GENERAL DESCRIPTION OF BUSINESS ACTIVITY	NAME OF BUSINESS ENTITY COCA COLA, INC GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Biotech company FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000	<u>beverage</u> <u>products</u> FAIR MARKET VALUE □ \$2,000 - \$10,000 □ \$100,001 - \$1,000,000 □ Over \$1,000,000
NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT Stock
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY AOL TIME WAIRNER GENERAL DESCRIPTION OF BUSINESS ACTIVITY	NAME OF BUSINESS ENTITY DISNey, Wat Holding Co GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Interactive tech Services FAIR MARKET VALUE	entertainment FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT X Stock	NATURE OF INVESTMENT Stock
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
Comments:	· .

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION		
Name	Pavley	

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Home Depot, INC. GENERAL DESCRIPTION OF BUSINESS ACTIVITY	Merck & Co GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Home Improvement Center	pharmaceutical
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT ▼ Stock Other
(Describe) Partnership () Income Received of \$0 - \$499	(Describe) Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	○ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//	//
NAME OF BUSINESS ENTITY	
	NAME OF BUSINESS ENTITY
Thtel Corporation GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Semi Conductor Chipmaker	athletic footware/apparel
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock ☐ Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
<i>y</i> , , , , , , , , , , , , , , , , , , ,	
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	/
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Microsoft Corp	Charles Schwab (orp.
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
soft ware	Financial Services
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000	X \$2,000 - \$10,000
S100,001 - \$1,000,000 Cover \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT ☑ Stock ☐ Other	NATURE OF INVESTMENT ▼ Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Commente	

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Name

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
PAVLEY FARM	
HILG Carlton Rd. Watsonville, CA	Name .
Address (Business Address Acceptable) 9502 b	Address (Business Address Acceptable)
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY FAMILY FAVW	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE / IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$100,001 - \$1,000,000 ACQUIRED DISPOSED
NATURE OF INVESTMENT Sole Proprietorship Partnership NATURE OF INVESTMENT Partnership	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Sole Proprietorship Partnership Other SiGHU	Sole Proprietorship Partnership Cther
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RAT SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499 \$10,001 - \$100,000	\$10,001 - \$100,000
☐ \$1,000 ☐ \$1,000 ☐ \$1,000	\$500 - \$1,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	■ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
de de la companya de	
- ALCOHOLOGICA CONTRACTOR CONTRAC	
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
416 Carton Rd. Watsonille, CA	
Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property 95076	Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$100,001 - \$1,000,000 ACQUIRED DISPOSED
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments: & There are NO SIVAL SOLVES	FPPC Form 700 (2010/2011) Sch. A
of 10,000 or more	FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gc
or 10,000 or mare	

SCHEDULE D Income - Gifts



NAME OF SOURCE	▶ NAME OF SOURCE
CA Professional five Fighters ADDRESS (Business Address Acceptable) Sacrament	ADDRESS (Business Address Acceptable)
ADDRESS (Business Address Acceptable) Sacrament	1401 21st St. Stc 200 Sacramento
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
1,11,10 : 68.97 dinner? cocktails	1, 12, 10 s 110.78 Caucus retreat
, , ,	, , , ,
► NAME OF SOURCE 3 & CONOMY	NAME OF SOURCE
CA Foundation on the Environment ADDRESS (Business Address Acceptable) 94133	Pepperdine University
ADDRESS (Business Address Acceptable) 94133 Pier 35 Ste 202 San Fruncisco	24 255 Pagific Coast How Maliby
BUSINESS ACTIVITY, IF ANY, OF SOURCE	ADDRESS (Business Address Acceptable) 24255 Pacific Coast thry Mall by BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
10,35,10 s 459.89 lodging 3 meals	10,02,10 :184.29 framed photos
NAME OF SOURCE	National Caucus of Environmental
ADDRESS (Business Address Acceptable)	
ADDRESS (Business Address Acceptable) 95814 1201 T Street Ste200 Sacrament	ADDRESS (Business Address Acceptable) 2003 (1920 LStreet, NW Ste 800 Washington ?
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
2 reception	1
2,2,10 : 25.8 food 3 beverage	7,20,10 : 151.85 meal3 transportation
4,26,10 , 37,40 God 3 beverage	
0	
	\$\$
Comments:	

SCHEDULE D Income - Gifts

CALIFORNIA FORM FAIR POLITICAL PRACTICES CO	
Name	1
+ Paulou	

ADDRESS (Business Address Acceptable) BV. Ormo 1231 Planta Alta Rosavid BUSINESS ACTIVITY, IF ANY, OF SOURCE S 2000 KDB HOW PROFIT OVGANIZATION DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 11,12,2010; 1397.00 Accomodations meals, 3 ground Ministry of foreign fliftings ADDRESS (Business Address Acceptable) Tratings 180, Santiago Chile BUSINESS ACTIVITY, IF ANY, OF SOURCE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 11,18,2010; 500 ground transport	NAME OF SOURCE Argentina	► NAME OF SOURCE
ADDRESS (Business Address Acceptable) BY. Ormo 1231, Planta Alta Posario BUSINESS ACTIVITY, IF ANY, OF SOURCE SAMPPO AND PTO A CYAMAI 72 A FOR MEDIATE (mmlddlyy) VALUE DATE (mmlddlyy) VALUE DESCRIPTION OF GIFT(S) II / 12/2010 s 1397. Accome dations, meals, 3 ground typns printin ADDRESS (Business Address Acceptable) NAME OF SOURCE NAME OF SOURCE NAME OF SOURCE NOT CHARLES (Dusiness Address Acceptable) 1300 19 HSt. NW St2000 Wachington DATE (mmlddlyy) VALUE DESCRIPTION OF GIFT(S) DATE (mmlddlyy) VALUE DESCRIPTION OF GIFT(S) BUSINESS ACTIVITY, IF ANY, OF SOURCE NOT CHARLES (Business Address Acceptable) DATE (mmlddlyy) VALUE DESCRIPTION OF GIFT(S) BUSINESS ACTIVITY, IF ANY, OF SOURCE	Fundacion Nueva Generación	Ministry of Foreign Affairs of Child
DATE (mm/dd/y) VALUE DESCRIPTION OF GIFT(S) II , 12, 2010 s 1397. Accomo dations, meals) 3 ground trans portation II , 18, 2010 s 500 Accomo dations, meals) 3 ground trans portation II , 18, 2010 s 500 Accomo dations, meals) 3 ground trans portation II , 18, 2010 s 500 Accomo dations, meals) 3 ground trans portation II , 18, 2010 s 500 Accomo dations or transportation II , 18, 2010 s 600 Accomo dations or transportation II , 18, 2010 s 600 Accomo dations or transportation II , 18, 2010 s 600 Accomo dations or transportation II , 18, 2010 s 600 Accomo dations or transportation II , 18, 2010 s 600 Accomo da	ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable) _ V
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) II , 12, 2010 s 1397. Accome dations meals , 3 ground trans portation NAME OF SOURCE BUSINESS ACTIVITY, IF ANY, OF SOURCE	BV. Ormo 1231, Planta Alta, Rosavid BUSINESS ACTIVITY, IF ANY, OF SOURCE \$ 2000 KDB	Teatings 180, Santiago Chile BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/y) VALUE DESCRIPTION OF GIFT(S) II 12,2010; 1397. Accomodations meals; 3 ground transportation NAME OF SOURCE National Parks Conservation Asson ADDRESS (Business Address Acceptable) I300 19th St. NW St8300 Wachington BUSINESS ACTIVITY, IF ANY, OF SOURCE ADDRESS (Business Address Acceptable) DATE (mm/dd/y) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/y) VALUE DESCRIPTION OF GIFT(S) NAME OF SOURCE ADDRESS (Business Address Acceptable) DATE (mm/dd/y) VALUE DESCRIPTION OF GIFT(S) NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE		
NAME OF SOURCE National Parks Conservation Ass n ADDRESS (Business Address Acceptable) 1300 19th St. NW Stedoo Washington BUSINESS ACTIVITY, IF ANY, OF SOURCE NOT OFFIT OYOUM ZATION DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 9,27,2010 8 420 airfare ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE NAME OF SOURCE NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/vv) VALUE/ DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
NAME OF SOURCE National Parks Conservation Ass n ADDRESS (Business Address Acceptable) 1300 19th St. NW Stedoo Washington BUSINESS ACTIVITY, IF ANY, OF SOURCE NOT OFFIT OYOUM ZATION DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 9,27,2010 8 420 airfare ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE NAME OF SOURCE NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE	11,12,2010; 1397.00 Accomodations,	11, 18,2010; 500 - ground transport
NAME OF SOURCE National Parks Conservation Ass n ADDRESS (Business Address Acceptable) 1300 19th St. NW Stedoo Washington BUSINESS ACTIVITY, IF ANY, OF SOURCE NOT OFFIT OYOUM ZATION DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 9,27,2010 8 420 airfare ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE NAME OF SOURCE NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE		scommemorate
National Parks Conservation Ass n ADDRESS (Business Address Acceptable) 1300 19th St. NW Ste300 Wachington BUSINESS ACTIVITY, IF ANY, OF SOURCE NON ORDIT ORGIT ORGANIZATION DATE (mm/dd/y) VALUE DESCRIPTION OF GIFT(S) 9,27,2010 420 airfare 1)
ADDRESS (Business Address Acceptable) 1300 19th St. NW Steboo Wachington BUSINESS ACTIVITY, IF ANY, OF SOURCE NON ON H. CYOLAN ZATION DATE (mm/dd/y) VALUE DESCRIPTION OF GIFT(S) 1, 1, s DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) NAME OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) NAME OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) NAME OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) NAME OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE BUSINESS ACTIVITY, IF ANY, OF SOURCE	► NAME OF SOURCE	▶ NAME OF SOURCE
ADDRESS (Business Address Acceptable) 1300 19th St. NW Steboo Wachington BUSINESS ACTIVITY, IF ANY, OF SOURCE NON ON H. CYOLAN ZATION DATE (mm/dd/y) VALUE DESCRIPTION OF GIFT(S) 1, 1, s DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) NAME OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) NAME OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) NAME OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) NAME OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE BUSINESS ACTIVITY, IF ANY, OF SOURCE	National Parks Conservation Assn	
DATE (mm/dd/y) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) J_J\$ NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE BUSINESS ACTIVITY, IF ANY, OF SOURCE		ADDRESS (Business Address Acceptable)
DATE (mm/dd/y) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) J_J\$ NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE BUSINESS ACTIVITY, IF ANY, OF SOURCE	1300 19th St. NW Ste300 Washington	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) J. 27, 2010, 420	N ~ 1 · (BUSINESS ACTIVITY, IF ANY, OF SOURCE
9,21,2010, 420 airfare		
	DATE (mm/dd//y) VALUE J DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
► NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE ■ NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE	9,27,2010, 420 airfare	\$
► NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE ■ NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE	\$	\$
ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE BUSINESS ACTIVITY, IF ANY, OF SOURCE	\$	
BUSINESS ACTIVITY, IF ANY, OF SOURCE BUSINESS ACTIVITY, IF ANY, OF SOURCE	► NAME OF SOURCE	► NAME OF SOURCE
	ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) //	BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
	DATE (mm/dd/vv) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/vv) VALUE DESCRIPTION OF GIFT(S)
		,
\$ \$		
Comments:	Comments:	

(EB)

Comments: _

SCHEDULE DICES COMMISSION INCOME - Gifts 2011 MAR 10 PM 1: 37

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

MAH 9 2011

NAME OF SOURCE	► NAME OF SOURCE
Monterey Bay Aquarium Foundation	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
886 Cannery Row Monterey, CA 93940	11
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
non- profit	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
04 , 06 , 10 s 53.79 food & beverage	\$
\$	\$
	\$
NAME OF SOURCE	► NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
\$	
	\$
	\$
NAME OF SOURCE	Verification
ADDRESS (Business Address Acceptable)	Print Name Fran Pavley
BUSINESS ACTIVITY, IF ANY, OF SOURCE	Office, Agency Senate or Court
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	Statement Type 2010/2011 Annual Assuming Leaving Annual Candidate
	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.
	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
	Date Signed March 7, 2011 (month day, year)
•	(d)(5) Signature